



**DESFILE Y FESTIVAL DOMINICANO
DEL CONDADO DE UNION, INC.
(DEFEDOMCUNI)**

587 WESTMINSTER AVE
ELIZABETH, NJ, 07208

OFFICE (908) 289-6272
FAX (908) 355-2026

SOUVENIR JOURNAL

Contact Information:

Company/Organización Name: _____

Contact Person: _____ Title _____

Company Address: _____

Tel: _____ Fax _____ E-Mail _____

Sponsor's Product: _____

Promotion Type: _____

Journal Rates and Specifications:

Souvenir Journal: 8 1/2x11 – Full color

____ Full Page	\$600.00	____ Half Page	\$300.00
____ Back Cover	\$1000.00	____ Inside Back Cover	\$800.00
____ Inside Front Cover	\$800.00	____ Quarter Page	\$150.00

Sponsor's Responsibilities: Sponsor is responsible to provide all artwork and Product information pertaining to the creation of the journal, flyers, banners, Posters, and all promotional support. All of the items must be provided to Dominican Parade of Union County, Inc, by **July 15, 2006** at 587 Westminster Ave Elizabeth, NJ, 07208 – Phone:908-289-6272 or by E-mail: webmaster@desfiledominicanodelcondadodeunion.com

The undersigned hereby agrees to comply with the rules and regulations of Dominican Parade and Festival of the Union County, Inc, and to abide by all Local and Federal Laws, which may be applicable. The following is prohibited: Demonstration of racing, written or spoken obscene language, fireworks and any acts or activities that may represent a safety hazard to the participants or spectators. Throwing flowers, fruits, flyers from vehicles or floats, is prohibited by law.

Will not hold Dominican Parade and Festival of the Union County, Inc, any members of their Directors responsible for damages or injuries to any member of our group as result of our participation in the parade.

Payment Terms: Due upon the date of signing this agreement, is the amount equal to half of the total cost. The balance is due on or prior to **July 15, 2006.**

Please make checks payable to: Desfile y Festival Dominicano del Condado de Union, Inc.

Print Name of Authorize Representative

Title of Authorized Representative

Signature of Authorized Representative

Date

Please print text of your ad in the space provided below or attach copy to this form: